

FORM 5A

Rev 02/08

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

COMPLETED INTERVAL REPORT

Document Number:

400134723

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 47120
2. Name of Operator: KERR-MCGEE OIL & GAS ONSHORE LP
3. Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-37
4. Contact Name: CARA MAHLER
Phone: (720) 929-6029
Fax: (720) 929-7029

5. API Number 05-123-20690-00
6. County: WELD
7. Well Name: PEPPLER Well Number: 3-30A
8. Location: QtrQtr: NENW Section: 30 Township: 3N Range: 67W Meridian: 6
9. Field Name: Field Code:

Completed Interval

FORMATION: J SAND Status: TEMPORARILY ABANDONED
Treatment Date: 12/21/2010 Date of First Production this formation: 03/21/2002
Perforations Top: 7647 Bottom: 7675 No. Holes: 84 Hole size: 0.42
Provide a brief summary of the formation treatment: Open Hole:
Spot 2250# sand plug, top of plug @ 7442'.
This formation is commingled with another formation: Yes No
Test Information:
Date: Hours: Bbls oil: Mcf Gas: Bbls H2O:
Calculated 24 hour rate: Bbls oil: Mcf Gas: Bbls H2O: GOR:
Test Method: Casing PSI: Tubing PSI: Choke Size:
Gas Disposition: Gas Type: BTU Gas: API Gravity Oil:
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:
Reason for Non-Production:
Set Sand Plug @ 7442' for NB/CD REFRAC
Date formation Abandoned: 12/21/2010 Squeeze: Yes No If yes, number of sacks cmt
Bridge Plug Depth: Sacks cement on top:

FORMATION: NIOBRARA-CODELL Status: PRODUCING

Treatment Date: 01/11/2011 Date of First Production this formation: 01/19/2011

Perforations Top: 6990 Bottom: 7273 No. Holes: 108 Hole size: 0.42

Provide a brief summary of the formation treatment: _____ Open Hole:

NB PERF 6990-7106 HOLES 66 SIZE .42 CD PERF 7258-7273 HOLES 42 SIZE .40
Re-Frac Niobrara A & B & C down 4-1/2" Csg w/ 252 gal 15% HCl & 241,836gal Slickwater w/ 201,060# 40/70, 4,440# SB Excel.
Re-Frac Codell down 4-1/2" Csg w/ 128,100 gal Vistar w/ 261,120# 20/40, 4,100# SB Excel.

This formation is commingled with another formation: Yes No

Test Information:

Date: 02/16/2011 Hours: 24 Bbls oil: 4 Mcf Gas: 41 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 4 Mcf Gas: 41 Bbls H2O: 0 GOR: 10250

Test Method: FLOWING Casing PSI: 420 Tubing PSI: _____ Choke Size: _____

Gas Disposition: SOLD Gas Type: WET BTU Gas: 1276 API Gravity Oil: 48

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production:

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: CARA MAHLER

Title: REGULATORY ANALYST 1 Date: _____ Email CARA.MAHLER@ANADARKO.COM

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)